FORM EXEMPT UNDER 44 U.S.C 3512

INTERNET FORM NLRB-501

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

DO NOT WRITE IN THIS SPACE					
Case	28-CA-306068	Date Filed October 27,2022			

INSTRUCTIONS: File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring. 1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT b. Tel. No. 505.323.4343 a. Name of Employer New Mexico Philharmonic c. Cell No. f. Fax No. d. Address (Street, city, state, and ZIP code) e. Employer Representative (6), (b) (7)(C) P.O. Box 21428 g. e-Mail Albuquerque, NM 87154 @nmphil.org h. Number of workers employed i. Type of Establishment (factory, mine, wholesaler, etc.) j. Identify principal product or service Orchestra Orchestral performance k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (list of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. 2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) Over the last 180 days, by its conduct, the Employer has engaged in bad faith bargaining by refusing to bargain prior to contract expiration, refusing to provide economic proposals after months of bargaining, and by refusing to provide information relevant to negotiations. The Employer is currently engaging in surface bargaining and shows no actual desire to negotiate a successor agreement with the Union. 3. Full name of party filing charge (if labor organization, give full name, including local name and number) Albuquerque Musicians Association, Local 618, American Federation of Musicians 4b. Tel. No. 505.255.2069 4a. Address (Street and number, city, state, and ZIP code) 2701 San Pedro NE, Suite 12 4c Cell No Albuquerque, NM 87110 4d. Fax No. 4e. e-Mail 5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) American Federation of Musicians Tel. No. 6. DECLARATION 505.244.1200 I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief. Office, if any, Cell No. Shane Youtz, Attorney /s/ Shane Youtz (signature of representative or person making charge) (Print/type name and title or office, if any) Fax No. 505.244.9700 10/24/22 900 Gold Ave. SW, Albuquerque, NM 87102 shane@youtzvaldez.com (date)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.



UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

REGION 28 2600 North Central Avenue -Suite 1400 Phoenix, AZ 85004-3099



Download NLRB Mobile App

Telephone: (602)640-2160 Fax: (602)640-2178

Agency Website: www.nlrb.gov

October 27, 2022

New Mexico Philharmonic P.O. Box 21428 Albuquerque, NM 87154

> Re: New Mexico Philharmonic Case 28-CA-306068

Ladies and Gentlemen:

Enclosed is a copy of a charge that has been filed in this case. This letter tells you how to contact the Board agent who will be investigating the charge, explains your right to be represented, discusses presenting your evidence, and provides a brief explanation of our procedures, including how to submit documents to the NLRB.

<u>Investigator</u>: This charge is being investigated by Field Examiner Sandra E. Schickel whose telephone number is (202)273-3805. If this Board agent is not available, you may contact Deputy Regional Attorney David T. Garza whose telephone number is (505)313-7216.

<u>Right to Representation</u>: You have the right to be represented by an attorney or other representative in any proceeding before us. If you choose to be represented, your representative must notify us in writing of this fact as soon as possible by completing *Form NLRB-4701*, *Notice of Appearance*. This form is available on our website, www.nlrb.gov, or from an NLRB office upon your request.

If you are contacted by someone about representing you in this case, please be assured that no organization or person seeking your business has any "inside knowledge" or favored relationship with the National Labor Relations Board. Their knowledge regarding this proceeding was only obtained through access to information that must be made available to any member of the public under the Freedom of Information Act.

<u>Presentation of Your Evidence</u>: We seek prompt resolutions of labor disputes. Therefore, I urge you or your representative to submit a complete written account of the facts and a statement of your position with respect to the allegations set forth in the charge as

soon as possible. If the Board agent later asks for more evidence, I strongly urge you or your representative to cooperate fully by promptly presenting all evidence relevant to the investigation. In this way, the case can be fully investigated more quickly.

Full and complete cooperation includes providing witnesses to give sworn affidavits to a Board agent, and providing all relevant documentary evidence requested by the Board agent. Sending us your written account of the facts and a statement of your position is not enough to be considered full and complete cooperation. A refusal to fully cooperate during the investigation might cause a case to be litigated unnecessarily.

In addition, either you or your representative must complete the enclosed Commerce Questionnaire to enable us to determine whether the NLRB has jurisdiction over this dispute. If you recently submitted this information in another case, or if you need assistance completing the form, please contact the Board agent.

We will not honor requests to limit our use of position statements or evidence. Specifically, any material you submit may be introduced as evidence at a hearing before an administrative law judge regardless of claims of confidentiality. However, certain evidence produced at a hearing may be protected from public disclosure by demonstrated claims of confidentiality.

Further, the Freedom of Information Act may require that we disclose position statements or evidence in closed cases upon request, unless an exemption applies, such as those protecting confidential financial information or personal privacy interests.

<u>Preservation of all Potential Evidence:</u> Please be mindful of your obligation to preserve all relevant documents and electronically stored information (ESI) in this case, and to take all steps necessary to avoid the inadvertent loss of information in your possession, custody or control. Relevant information includes, but is not limited to, paper documents and all ESI (e.g. SMS text messages, electronic documents, emails, and any data created by proprietary software tools) related to the above-captioned case.

<u>Prohibition on Recording Affidavit Interviews:</u> It is the policy of the General Counsel to prohibit affiants from recording the interview conducted by Board agents when subscribing Agency affidavits. Such recordings may impede the Agency's ability to safeguard the confidentiality of the affidavit itself, protect the privacy of the affiant and potentially compromise the integrity of the Region's investigation.

<u>Correspondence:</u> All documents submitted to the Region regarding your case MUST be filed through the Agency's website, <u>www.nlrb.gov</u>. This includes all formal pleadings, briefs, as well as affidavits, documentary evidence, and position statements. The Agency requests all evidence submitted electronically to be in the form it is normally used and maintained in the course of business (i.e., native format). Where evidence submitted electronically is not in native format, it should be submitted in a manner that retains the essential functionality of the native format (i.e., in a machine-readable and searchable electronic format).

If you have questions about the submission of evidence or expect to deliver a large quantity of electronic records, please promptly contact the Board agent investigating the charge. If you cannot e-file your documents, you must provide a statement explaining why you do not have access to the means for filing electronically or why filing electronically would impose an undue burden.

In addition, this Region will be issuing case-related correspondence and documents, including complaints, compliance specifications, dismissal letters, deferral letters, and withdrawal letters, electronically to the email address you provide. To ensure that you receive important case-related correspondence, please ensure that the Board Agent assigned to your case has your preferred email address. These steps will ensure that you receive correspondence faster and at a significantly lower cost to the taxpayer. If there is some reason you are unable to receive correspondence via email, please contact the agent assigned to your case to discuss the circumstances that prevent you from using email.

<u>Controlled Unclassified Information (CUI)</u>: This National Labor Relations Board (NLRB) proceeding may contain Controlled Unclassified Information (CUI). Subsequent information in this proceeding may also constitute CUI. National Archives and Records Administration (NARA) regulations at 32 CFR Part 2002 apply to all executive branch agencies that designate or handle information that meets the standards for CUI.

* * *

Information about the Agency, the procedures we follow in unfair labor practice cases and our customer service standards is available on our website, www.nlrb.gov or from an NLRB office upon your request. NLRB Form 4541, Investigative Procedures offers information that is helpful to parties involved in an investigation of an unfair labor practice charge.

We can provide assistance for persons with limited English proficiency or disability. Please let us know if you or any of your witnesses would like such assistance.

Very truly yours,

Cornele A. Overstreet Regional Director

andell threatest

Enclosures:

- 1. Copy of Charge
- 2. Commerce Questionnaire

CAO/SES/acp

FORM NLRB-5081	NATIONAL	LABOR RELATI	ONS BOARD						
	QUESTIONNAIRE ON COMMERCE INFORMATION								
Please read carefully, answer all applicable items, and return to the NLRB Office. If additional space is required, please add a page and identify item number.									
CASE NAME CASE NAME									
						CA-306068			
1. EXACT LEGAL TITLE OF ENTITY (As filed	with State and/or	stated in legal do	cuments forming	entity)					
2. TYPE OF ENTITY									
[] CORPORATION [] LLC [] LLP [] PARTNERSHIP [] SOLE PROPRIETORSHIP [] OTHER (Specify)									
3. IF A CORPORATION or LLC									
A. STATE OF INCORPORATION OR FORMATION	B. NAME, A	DDRESS, AND R	ELATIONSHIP (e.;	g. paren	t, subsidiary	7) OF ALL RELATED F	NTITIES		
4. IF AN LLC OR ANY TYPE OF PARTNERSH	IIP, FULL NAMI	E AND ADDRESS	OF ALL MEMB	ERS O	R PARTNE	ERS			
5. IF A SOLE PROPRIETORSHIP, FULL NAM	E AND ADDRES	S OF PROPRIET	TOR						
, , , , , , , , , , , , , , , , , , , ,									
6. BRIEFLY DESCRIBE THE NATURE OF YOUR OPERATIONS (Products handled or manufactured, or nature of services performed).									
7A. PRINCIPAL LOCATION:	7B. BRANCH	LOCATIONS							
		72. 2102.(012.							
8. NUMBER OF PEOPLE PRESENTLY EMPLOYED									
	OYED								
A. TOTAL:		ADDRESS INVOL	VED IN THIS MA	TTER:					
A. TOTAL: 9. DURING THE MOST RECENT (Check the ap	B. AT THE A		VED IN THIS MA] FISCAL Y	YEAR (FY DATES		_)	
9. DURING THE MOST RECENT (Check the ap	B. AT THE A] CALENDAR	[] 12 MONTHS	or []		YEAR (FYDATESYES	NO	_)	
	B. AT THE A] CALENDAR	[] 12 MONTHS	or []			NO	_)	
DURING THE MOST RECENT (Check the ap A. Did you provide services valued in excess of \$50	B. AT THE Appropriate box): [0,000 directly to cues valued in excess	CALENDAR Istomers outside your services of \$50,000 to cure	[] 12 MONTHS our State? If no, industromers in your State	or []	ctual value.		NO)	
DURING THE MOST RECENT (Check the approximate the services valued in excess of \$50 \$	B. AT THE Appropriate box): [0,000 directly to cues valued in excess outside your State?	I CALENDAR Instomers outside your series of \$50,000 to cur. If no, indicate the in excess of \$50,000 to cur.	our State? If no, indestomers in your State value of any such	or [] dicate ac te who p services	ctual value.	YES	NO	_)	
DURING THE MOST RECENT (Check the ap Did you provide services valued in excess of \$50 \$ B. If you answered no to 9A, did you provide service goods valued in excess of \$50,000 from directly oprovided. \$	B. AT THE Appropriate box): [0,000 directly to cues valued in excess outside your State?	I CALENDAR Instomers outside your series of \$50,000 to cur. If no, indicate the in excess of \$50,000 to cur.	our State? If no, indestomers in your State value of any such	or [] dicate ac te who p services	ctual value.	YES	NO)	
DURING THE MOST RECENT (Check the approximate the services valued in excess of \$50 \$50 \$50 \$50 \$10 \$10 \$10 \$10 \$10 \$10 \$10 \$10 \$10 \$1	B. AT THE Appropriate box): [0,000 directly to cues valued in excess outside your State? le services valued a stations, commerce	Istomers outside your service of \$50,000 to cur of fino, indicate the in excess of \$50,000 cial buildings, educated the service of \$50,000 cial buildings, educated the service of \$50,000 cial buildings, educated the service of \$50,000 cial buildings.	our State? If no, indestomers in your State value of any such to public utilities attional institutions,	or [] dicate act te who p services s, transit , or retai	ctual value. purchased s you systems, il concerns?	YES	NO	_)	
DURING THE MOST RECENT (Check the approximate the services valued in excess of \$50 \$50 \$1.	B. AT THE Appropriate box): [0,000 directly to cuese valued in excess outside your State? le services valued a stations, commercial	Istomers outside your service of \$50,000 to cur of fro, indicate the in excess of \$50,00 cial buildings, educated outside your services.	our State? If no, indestomers in your State value of any such to public utilities actional institutions, our State? If less the	or [] dicate ac te who p services s, transit , or retai	ctual value. purchased s you systems, il concerns?	YES	NO	_)	
DURING THE MOST RECENT (Check the approximate the services valued in excess of \$50 \$50 \$50 \$50 \$10 \$10 \$10 \$10 \$10 \$10 \$10 \$10 \$10 \$1	B. AT THE Appropriate box): [0,000 directly to cutes valued in excess outside your State? le services valued a stations, commerciated in excess of \$5	Istomers outside your state of \$50,000 to cut of fine, indicate the in excess of \$50,00 cial buildings, educing the state of the state of \$50,00 cial buildings, educing the state of \$50,00 cial buildings and \$50,000 cial buildings are stated to \$50,000 cial buildings and \$50,000 cial buildings are stated to \$50,000 cial buildings and \$50,000 cial buildings are stated to \$50,000 cial building	our State? If no, indestomers in your State value of any such to public utilities ational institutions, our State? If less the sustomers located in	or [] dicate ac te who p services s, transit , or retai	ctual value. purchased s you systems, il concerns? 000, indicat	YES	NO	_)	
D. DURING THE MOST RECENT (Check the approximate services valued in excess of \$50 \$	B. AT THE Appropriate box): [0,000 directly to cutes valued in excess outside your State? de services valued in excess of \$500 from directly outside your states.	Istomers outside your state? Istomers outside your state?	our State? If no, indestomers in your State value of any such to to public utilities ational institutions, our State? If less the ustomers located in: If less than \$50,000	or [] dicate ac tte who p services s, transit , or retai nan \$50,0 uside you), indicat	systems, il concerns? 000, indicator State who te amount.	YES	NO	_)	
DURING THE MOST RECENT (Check the approximate services valued in excess of \$50 \$	B. AT THE Appropriate box): [0,000 directly to cutes valued in excess outside your State? de services valued in excess of \$500 from directly outside your states.	Istomers outside your state? Istomers outside your state?	our State? If no, indestomers in your State value of any such to to public utilities ational institutions, our State? If less the ustomers located in: If less than \$50,000	or [] dicate ac tte who p services s, transit , or retai nan \$50,0 uside you), indicat	systems, il concerns? 000, indicator State who te amount.	YES	NO	_)	

NAME TITLE E-MAIL ADDRESS TEL. NUMBER

10. ARE YOU A MEMBER OF AN ASSOCIATION OR OTHER EMPLOYER GROUP THAT ENGAGES IN COLLECTIVE BARGAINING?

12. AUTHORIZED REPRESENTATIVE COMPLETING THIS QUESTIONNAIRE

Did you begin operations within the last 12 months? If yes, specify date:

[] YES [] NO (If yes, name and address of association or group).

points outside your State? If less than \$50,000, indicate amount. \$_

Gross Revenues from all sales or performance of services (Check the largest amount)

 $[\]\ \$100,000\ [\]\ \$250,000\ [\]\ \$500,000\ [\]\ \$1,000,000\ or\ more \quad If\ less\ than\ \$100,000,\ indicate\ amount.$

11. REPRESENTATIVE BEST QUALIFIED TO GIVE FURTHER INFORMATION ABOUT YOUR OPERATIONS

H.

NAME AND TITLE (Type or Print) SIGNATURE E-MAIL ADDRESS DATE

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and/or unfair labor practice proceedings and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary. However, failure to supply the information may cause the NLRB to refuse to process any further a representation or unfair labor practice case, or may cause the NLRB to issue you a subpoena and seek enforcement of the subpoena in federal court.

UNITED STATES OF AMERICA BEFORE THE NATIONAL LABOR RELATIONS BOARD

NEW MEXICO PHILHARMONIC	
Charged Party	
and	Case 28-CA-306068
ALBUQUERQUE MUSICIANS ASSOCIATION LOCAL 618 A/W AMERICAN FEDERATION C MUSICIANS)F
Charging Party	
AFFIDAVIT OF SERVICE OF CHARGE AGAINATION II, the undersigned employee of the National Labor Re October 27, 2022, I served the above-entitled docume following persons, addressed to them at the following	lations Board, state under oath that on nt(s) by post-paid regular mail upon the
New Mexico Philharmonic P.O. Box 21428 Albuquerque, NM 87154	
October 27, 2022,	Abbra Pyle, Designated Agent of NLRB
Date	Name
-	/s/ Abbra Pyle Signature